

PTO/SB/21 (01-08)
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Application Number 09/834,307-Conf. #no.3036 **TRANSMITTAL** Filing Date April 12, 2001 **FORM** First Named Inventor Richard J. Whitbourne Art Unit Examiner Name M. P. Young (to be used for all correspondence after initial filing) Attorney Docket Number Total Number of Pages in This Submission 32286-192724 ENCLOSURES (Check all that apply) After Allowance Communication x | Fee Transmittal Form Drawing(s) to TC Appeal Communication to Board of Fee Attached Licensing-related Papers Appeals and Interferences Appeal Communication to TC x | Amendment/Reply Petition (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final Proprietary Information Provisional Application Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address X Other Ellipselow): Other Enclosure(s) (please x Extension of Time Request Terminal Disclaimer Declaration Under 37 C.F.R. 1.132 Express Abandonment Request Request for Refund (including Appendices Information Disclosure Statement CD, Number of CD(s) A and B) (with PTO SB 08) Certified Copy of Priority Landscape Table on CD Document(s) Reply to Missing Parts/ Remarks Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name VENABLE, LLP Signature Printed name Michael A. Gollin Date Reg. No. 2/22/08 31,957



PTO/SB/17 (10-07)
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Effective on 12/08/2004.					Complete if Known					
FEE TRANSMITTAL								09/834,307-Conf. #no.3036		
								April 12, 2001		
For FY 2008								Richard J. Whitbourne		
Applicant claims small entity status. See 37 CFR 1.27								M. P. Young 1618		
				7.11. 0.111.			32286-192724			
TOTAL AMOUNT OF PAYMENT (\$) 1,230.00					Attorney Docket No. 32286-192724					
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
x Deposit Account Deposit Account Number 22-0261 Deposit Account Name: Venable LLP										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION										
1. BASIC FILIN	IG, SEARCH, AN	D EXA	MINATION FE	ES						
		FILIN	IG FEES	SE	ARCH FEE		EXAMI	NATION FEES		
Application T	ype <u>Fe</u>	e (\$)	Small Entity Fee (\$)	Fee (\$	Small E Fee (Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)
Utility	3	310	155	510	255	i	210	105		
Design	2	210	105	100	50)	130	65		
Plant	2	210	105	310	155	í	160	80		
Reissue	3	310	155	510	255	i	620	310		
Provisional	2	210	105	0	C	ı	0	0		
2. EXCESS CLAIM FEES Small Entity										
Fee Description Each claim over 20 (including Reissues)									Fee (\$)	Fee (\$)
Problem and the state of the problem is a second of the problem in the second of the problem is a second of the problem in the second of the problem is a second of the problem in the second of the problem is a second of the problem in the second of the problem is a second of the problem in the second of the s										25 105
Multiple dependent claims									370	185
			Paid (\$) Multiple Deper							
x _ =							Fee Paid (
HP = highest number of total claims paid for, if greater than 20.										
Indep. Claims Extra Claims Fee (\$) Fee F				Paid (\$)						
x =										
HP = highest number of independent claims paid for, if greater than 3.										
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)									Fee	Paid (\$)
100 = /50 = (round up to a whole number). x =										
4. OTHER FEE(S) Fees Paid (\$)										
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): Extension for response within third month Information Disclosure Statement Fee									1,050.00 180.00	
SUBMITTED BY										
Signature	MA				Registration N		31,957	Telephone	(202) 34	4-4000
Name (Print/Type)	Michael A. Go	ollin			(Attorney/Ager	i)	,	Date Z/	zz/09	
(: / , , , , ,								7	22/07	<u> </u>